

MULTIPLE DEPENDENT
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT'S

10/10/30657

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS		*		*		*	
IND.	DER.	IND.	DER.	IND.	DER.	IND.	DER.	IND.	DER.	IND.	DER.		
1								51					
2								52					
3								53					
4								54					
5								55					
6								56					
7								57					
8								58					
9								59					
10								60					
11								61					
12								62					
13								63					
14								64					
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36								86					
37								87					
38								88					
39								89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	3							TOTAL IND.					
TOTAL DER.	13							TOTAL DER.					
TOTAL CLAIMS	16							TOTAL CLAIMS					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS